

City of Kemah, Texas Department of Community Services

ELECTRICAL PERMIT APPLICATION

		Permit #:
Job Address:		Commercial Residential
Owner:	Contractor:	-
Address:	Address:	
City, St, Zip:	City, St, Zip:	
Phone:	Phone:	
E-mail:	E-mail:	
Description of Work:		
New		
Addition		
Alteration	Valuation of Work \$	
Repair	(Required)	
Other		
Scope of Work:		
	d examined this application and know the shis type of work will be complied with whet	•
Contractor m	ust be registered with the City of Kemah be	fore beginning work.
Print Name:	Licens	e #:
Signature:	Date:	
	Permit Fee:	\$
	Payment Type	:
	Payment Date	